

COMPLAINT

(for filers who are prisoners without lawyers)

2022 DEC 30 A 11:36

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF WISCONSIN

(Full name of plaintiff(s))

Octavious Markell Bohannon

v.

Case Number:

22-cv-1563

(to be supplied by Clerk of Court)

(Full name of defendant(s))

Milwaukee County Jail

Nurse-Practitioner Sennit

A. PARTIES

1. Plaintiff is a citizen of Wisconsin, and is located at
(State)

949 N. 9th St Milwaukee, WI 53233
(Address of prison or jail)

(If more than one plaintiff is filing, use another piece of paper.)

2. Defendant Milwaukee County Jail and Nurse
(Name)

is (if a person or private corporation) a citizen of Wisconsin
(State, if known)

and (if a person) resides at 949 N. 9th St.
(Address, if known)

and (if the defendant harmed you while doing the defendant's job)

worked for Milwaukee County Jail
(Employer's name and address, if known)

(If you need to list more defendants, use another piece of paper.)

B. STATEMENT OF CLAIM

On the space provided on the following pages, tell:

1. Who violated your rights;
2. What each defendant did;
3. When they did it;
4. Where it happened; and
5. Why they did it, if you know.

The Milwaukee County Jail along with Nurse-practitioner Bennit diagnosed me with diabetes. After the nurses withdrew my blood around the dates of (Nov. 20 and Nov 25) 2022 and started me on diabetic Medication's. After taking these Medications for 3 weeks, the nurses withdrew my blood again and told me "they thought I had diabetes but I did not that they had me taking another person in their care Medications" This could have caused me Mental & physical damage permanently. I've taken these Medications for 3 weeks straight while incarcerated at the Milwaukee County Jail on my housing unit 3A Cell # 11. I've also asked for the names of all the nurses that gave me these Medications and I was denied that information. Nurse-practitioner The Defendant who prescribed

me with the medications that was incorrect towards my
medical treatment this violated my Eighth Amendment
Constitution right "medical care claim"

C. JURISDICTION



I am suing for a violation of federal law under 28 U.S.C. § 1331.

OR



I am suing under state law. The state citizenship of the plaintiff(s) is (are) different from the state citizenship of every defendant, and the amount of money at stake in this case (not counting interest and costs) is \$_____.

D. RELIEF WANTED

Describe what you want the Court to do if you win your lawsuit. Examples may include an award of money or an order telling defendants to do something or to stop doing something.

I want the Court to award me 5 million dollar's once my lawsuit is won. I would like 50% of what I won in a bank account that I could have access to as I need and the other 50% I would like on my inmate account if I am still incarcerated

E. JURY DEMAND

I want a jury to hear my case.

☐ - YES

☒ - NO

I declare under penalty of perjury that the foregoing is true and correct.

Complaint signed this 19 day of December 2022.

Respectfully Submitted,



Signature of Plaintiff

2022012792

Plaintiff's Prisoner ID Number

949 N 9th St.

(Mailing Address of Plaintiff)

(If more than one plaintiff, use another piece of paper.)

REQUEST TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING THE FULL FILING FEE



I DO request that I be allowed to file this complaint without paying the filing fee. I have completed a Request to Proceed in District Court without Prepaying the Full Filing Fee form and have attached it to the complaint.



I DO NOT request that I be allowed to file this complaint without prepaying the filing fee under 28 U.S.C. § 1915, and I have included the full filing fee with this complaint.